
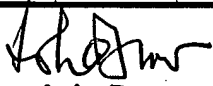


<b>Issue Classification</b> 	Application No.	Applicant(s)	
	10/005,745	YAO, X. STEVE	
	Examiner	Art Unit	
	LOHA BEN	2873	

ISSUE CLASSIFICATION											
ORIGINAL					CROSS REFERENCE(S)						
CLASS		SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
359		256			359	245	259	320			
INTERNATIONAL CLASSIFICATION											
G	0	2	F	1/03							
G	0	2	F	1/29							
				/							
				/							
				/							
_____ (Assistant Examiner) (Date)					 <b>Loha Ben</b> <b>Primary Examiner</b> (Primary Examiner)					Total Claims Allowed: 50	
_____ (Legal Instruments Examiner) (Date)										O.G. Print Claim(s) 31	

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant										<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
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